## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Dox 1450 Alexandria, Virginia 22313-1450 or Fax (871)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correcte maintenance fee notificat	ed below or directed oth	terwise in Block 1, by (	a) specifying a new corre	spondence address;	and/or (b) indicating a sep	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	7590 03/17	72008	шач		-	and a first and
				I hereby certify that this Fee(s) Transmittat is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Ston ISSUE FEE: address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
P.O. Box 7599 Loveland, CO 80537-0599				(Depositor's name)		
Loveland, CO 80	337-0399					(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/603,053	06/24/2003		Dean R. Thompson		10021004	1897
TITLE OF INVESTION: METHODS AND DEVICES FOR IDENTIFYING RELATED IONS FROM CHROMATOGRAPHIC MASS SPECTRAL DATASETS CONTAINING OVERLAPPING COMPONENTS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	06/17/2008
EXAM	INER	ART UNIT	CLASS-SUBCLASS	1		
CLOW, LORI A		1631	702-019000	-		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTIOSH 223) attached.  J "Fee Address" indication (or "Fee Address" Indication form PTIOSH 47; Rev 0.3-02 or more recent) attached. Use of a Custome Number is required.			2. For printing on the patient front page, list (1) the names of up to 3 registered patient attorneys or agents OR, alternatively, (2) the name of a single firm flaving as a member a registered attorney or agent) and the names of up to 1. The control of the patient of the control of the co			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (onto or type) PLEASE NOTE: Unless as sustages is identified below, the document has been filed for recordation as set forth in 3 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment (a) NAME OF ASSIGNEE  (b) RESIDENCE: (CTP) AND STATE OF COUNTRY)  Agilest Technologies Inc  Santa Clara, CA  Please check the appropriate assignee category or categories (will not be printed on the patent):   1 Individual 1 Corporation or other private group entity   O Government						
4a. The following fee(s):  Alssue Fee Publication Fee (N Advance Order - 4	io small entity discount p		Psyment of Tee(g): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Psyment by credit eard. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required feet(s), any deficiency, or credit any overpoyment, to Depoid Account Number 50 – 107 B. (enclose an extra copy of this form).			
	s SMALL ENTITY state	us. See 37 CFR 1.27.			L ENTITY status, See 37 C	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademari	d from anyone other than c Office.	the applicant; a regis	tered attorney or agent; or t	he assignee or other party in
Authorized Signature / Ian Hardcastle/			Date 2008-05-27			
Typed or printed nameIan Hardcastle			Registration No34,075			
This collection of information is required by 3 TCR, 13.11. The information is required to obtain or estain a benefit by the gabilite which is to file (and by the USPTO to process) an application. Confidentially is governed by \$5 U.S.C. 12.20 and \$7 CTR, 14.11. This collection is estimated to take 2 insulates to complete chapiting gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you required to complete this form and/or suggestions for recluing this burton, the collect the cents to the Chell Information Officer. U.S. Patest and refraedured Office. U.S. Patest and RADBERS. SIGNO TO Commissioner for Patesta, Pol. Soc. 1400, 1						
Under the Paperwork Re	duction Act of 1995, no	persons are required to re	spond to a collection of in	formation unless it d	isplays a valid OMB contro	l number.